

The Needs of Children of Incarcerated Mothers and their Caregivers

(A study based on the Initiative for
Incarcerated Mothers & Affected Children)

Singapore After-Care Association
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1. INTRODUCTION

A significant body of research indicates that children of incarcerated parents may suffer serious psychological and economic harm as a result of their parent's involvement with the criminal justice system. This paper will focus on the children of incarcerated mothers and their caregivers. When a child's mother is incarcerated, the child will experience detrimental effects due to the sudden changes of the primary caregiver and the family structure. Children of prisoners may exhibit high rates of anxiety, depression, post-traumatic stress, and attention disorders. They are more likely than other children to experience homelessness and to be shifted repeatedly from one household and caregiver to another (Travis et al., 2002). They frequently fare poorly in school and have extremely high truancy and dropout rates (ibid.). For all these reasons, children of prisoners are at high risk of becoming involved in delinquent or criminal behaviour themselves (Hawkins et al.).

Although most children with incarcerated parents have a father in prison, approximately eight to ten percent of them have lost their mother to the corrections system (ibid.). When a father goes to prison, his children usually remain in the care of their mother; but when a mother is incarcerated, her children are likely to be transferred to the care of a non-parental caregiver, most often their grandmother (Mumola, 2000). Therefore, these children are in need of much support and resources to assist them in coping with their mother's incarceration. In addition to the plight that the child faces, the caregiver of the child is also affected by the incarceration of the child's mother. Caregivers are often clueless and stressed with the sudden need for them to take up the role and responsibilities of caring for the child. Many expressed that the stress came from the fact that they lack parenting skills and capability to care for the children (Strozie et. al., 2011). Children whose mothers are incarcerated are also more likely to witness their parents' arrest and to experience significant trauma and household disruption as a result of that arrest.

This paper will examine the impact of maternal incarceration on young children and their caregivers. It aims to answer 2 research questions.

1. How does a mother's incarceration affect a child's emotional, social and physical well-being?
2. How well-prepared is the caregiver to care for the child, in terms of financial ability, the strength of the social support network that she has, as well as the caregiver's general state of health?

2. BACKGROUND

The needs of children of incarcerated mothers are usually overlooked during the criminal justice process. The impact on children and other family members when a mother is incarcerated would cause economic instability, a sense of loss, social stigma regarding incarceration and separation anxiety (Gardner, 2015). Family systems theory and family stress models highlight how external stressors affect interactions among family members especially on children of incarcerated parents as any changes in the caregiving arrangement would cause a disruption to both the children and temporary caregiver (Conger et al., 2002).

According to literature, many children of incarcerated mothers are raised in single-parent homes and are then cared for by grandparents or other relatives (Mumola, 2000). This happens because many of the fathers of these children are often already incarcerated, not married to the mothers or are in unstable relationships with the mothers. When these mothers are incarcerated, the future of

these families especially the children will be in jeopardy. As a result, these children who are between the ages of a few days to 12 years old may be sent to live with friends, relatives, grandparents or even strangers. Previous studies have indicated that children of incarcerated mothers are more likely to be cared for by their grandparents, during the period of the mother's incarceration, as compared to children of incarcerated fathers (Simmons, 2000). The caregivers of these children may feel obliged to take care of their own grandchildren when their mothers are incarcerated, even if they are not ready for it, as they are usually the next of kin. At times, they are also the secondary caregiver of the child even prior to the incarceration of the child's mother. Kinship care may be preferable to foster care as it entails a familiar caregiver and environment as well as the opportunity to maintain family links.

Some studies have shown that some grandparents may become overwhelmed by their caregiving responsibilities as evidenced by high rates of poverty and physical and mental health problems in custodial grandparents (Poehlmann, 2000b). It is thought that placement with fathers would have a higher likelihood of stability and would be associated with fewer contextual risks. In a study by Johnson and Waldfogel (2002), the authors found that children of incarcerated mothers were less likely to be placed with their fathers as most of the mothers were single parents and have more than one child. Most of the research about caregiving stability has focused on children placed in foster care while the mother is incarcerated. Little is known on the stability of kinship arrangement and the issues that caregivers face when caring for children of incarcerated mothers.

This paper will examine the challenges that the primary caregivers face when they are obligated to assume this role for the children of these incarcerated mothers. This study further seeks to understand the readiness of caregivers to care for children affected by maternal incarceration and the impact of maternal incarceration on the children. It hopes to inform relevant organisations of the current needs of these families and the services that can be designed specifically for these families in order to assist them in the future.

3. METHODOLOGY

Data was collected from 94 caregivers of children whose mothers are currently incarcerated. These caregivers are clients from the Initiative for Incarcerated Mothers and Affected Children (IIMAC) programme run by the Singapore After-Care Association (SACA). The IIMAC programme serves as a bridge between the incarcerated mothers and their children and assesses the caregiver's ability to take care of the children. Caregivers who are in need of additional support are referred to relevant community agencies for assistance.

A group of eight Social Work students from Nanyang Polytechnic (NYP) assisted SACA in the data collection process as part of their Final Year Project. The students carried out a secondary data analysis by looking through case files from 2011 to 2016 and filtering those with children aged 0 to 12 years of age for this study. Based on the case files, the students constructed a questionnaire with regards to the caregiver's well-being and circumstances at the time of caring for the children as well as the caregiving arrangements for the children.

Information was derived from a total of 94 case files in which data was gathered for a total of 151 children in which 46 were between the age of 0 and 2, 51 between 3 and 6 years old, and 54 between the age of 7 and 12 years old. Ninety percent of the data was collected from caregivers who were no longer part of the IIMAC programme and were not getting follow-ups by the case workers at SACA. However, due to the lack of responses from these closed cases, selected open

cases that were deemed suitable were included as well. Open-case participants are clients who are currently attached to a SACA case worker.

4. PROFILE OF THE INCARCERATED MOTHERS

This section will look into the basic demographic profile of the mothers in this study.



Figure 1.1

Figure 1.1 highlights that 55.32% of the mothers in this study are first time offenders – it is reasonable to assume that they form the majority of clients seeking help from the IIMAC programme as neither they nor their families would have had prior experience in dealing with such a situation.

Various studies suggest that children may be more affected by maternal (as opposed to paternal) incarceration, more so if the mothers are repeat offenders (Murray and Farrington, 2008). However, these children may be protected from harmful effects of maternal imprisonment if they receive stable caregiving arrangements and the caregivers receive appropriate social and economic support (ibid.). The effect of repeated maternal incarceration may reflect the financial constraints that maternal incarceration imposes on children, and such constraints may be expected to increase with the length of incarceration (Wildeman, 2009). For example, a child whose mother is incarcerated repeatedly for long periods may experience greater emotional stress or more frequent living-condition changes than a child whose mother is incarcerated only once for a relatively short time period (ibid).

The study indicates that 44.62% of the mothers seeking assistance are repeat offenders. Their children then are likely to experience greater emotional stress on account of the repeated number of times they experience the incarceration of their mother and all the negative consequences related to it.

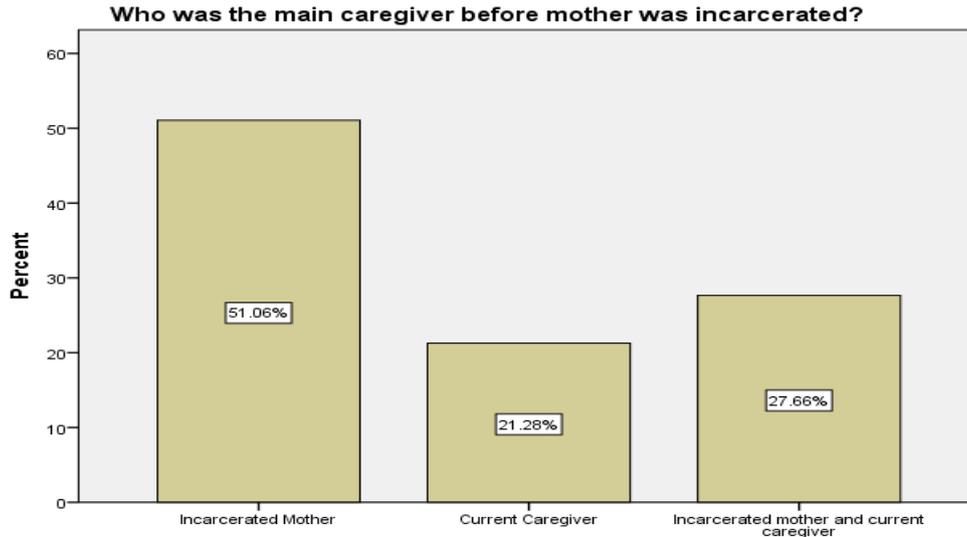


Figure 1.2

In figure 1.2, 51.06% of the children were cared for by their mothers before they were incarcerated. About 49% of the children have prior experience of being cared for by the current caregiver prior to their mother's incarceration. Literature has suggested that maternal incarceration most profoundly affects children's development negatively as it would cause disrupted attachment relationship given that most of these children were being cared by their mothers before their incarceration. When mothers are incarcerated, the children are not only being separated from their mothers but they are more often transiting to the care of a relative than to the care of the other parent (Mumola, 2000).

Attachment theory suggests that disruptions in the mother-child relationship increases risks to children and may negatively effect and disrupt the child's ability to form and maintain a secure attachment with the parent or another family member. In a traumatizing event such as incarceration of a parent, a secure attachment relationship buffers children from experiencing symptoms of anxiety (Dallaire & Weinraub, 2007).

In a research done by Poehlmann in 2005, the author examined the attachment of preschool-age children with their incarcerated mothers. The study showed that the children in her sample were more likely to have insecure attachment representations of their incarcerated mother. Children with insecure, disorganized, and disrupted attachment relationships are at risk for experiencing a number of negative outcomes including greater psychopathology and substance abuse (Poehlmann, 2005a). Most young children in Poehlmann's study exhibited multiple emotional and behavioral reactions to maternal imprisonment. Consistent with attachment theory (Bowlby, 1973), the majority of children initially reacted to separation with sadness and kept calling for or looking for their mothers. Other common reactions included confusion, worry, anger, acting out, fear, developmental regression, sleep problems, and indifference. Clearly, prolonged separation from an imprisoned mother who once cared for the child is a stressful experience. These findings highlight young children's need for emotional and developmental support during maternal imprisonment and caregivers' needs for information regarding children's common reactions to separation.

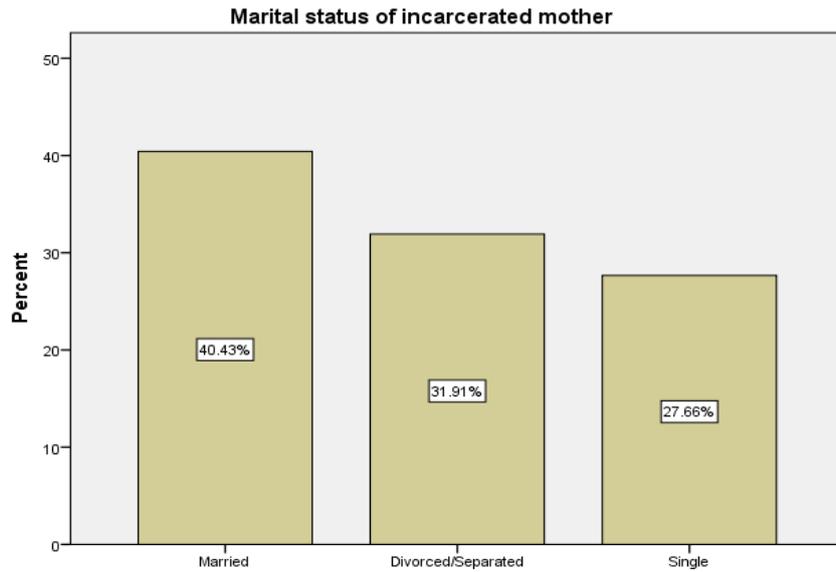


Figure 1.3

Almost 60% of the mothers are divorced, separated or single which means that it is likely that in these cases the fathers of the children may not be playing an active part in their upbringing. While about 40% of the mothers are listed as married the findings, which will be discussed in the next section, indicate that only a small percentage of the fathers are the main caregivers for these children and are actively present in their lives.

5. FINDINGS

5.1 Profile of Children

This section looks into the demographic profile of the children in this study.

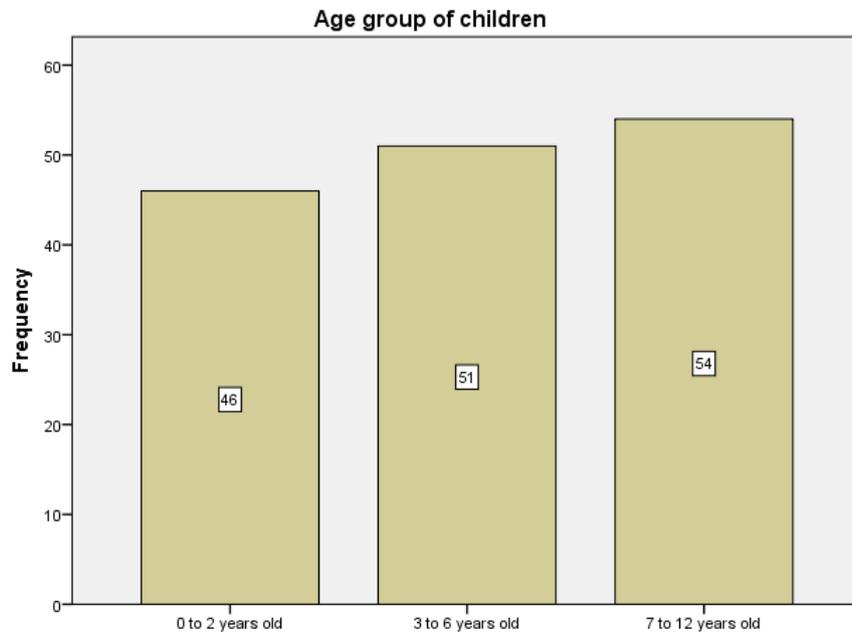


Figure 2.1: For this study there is a fairly even spread amongst the three age ranges.

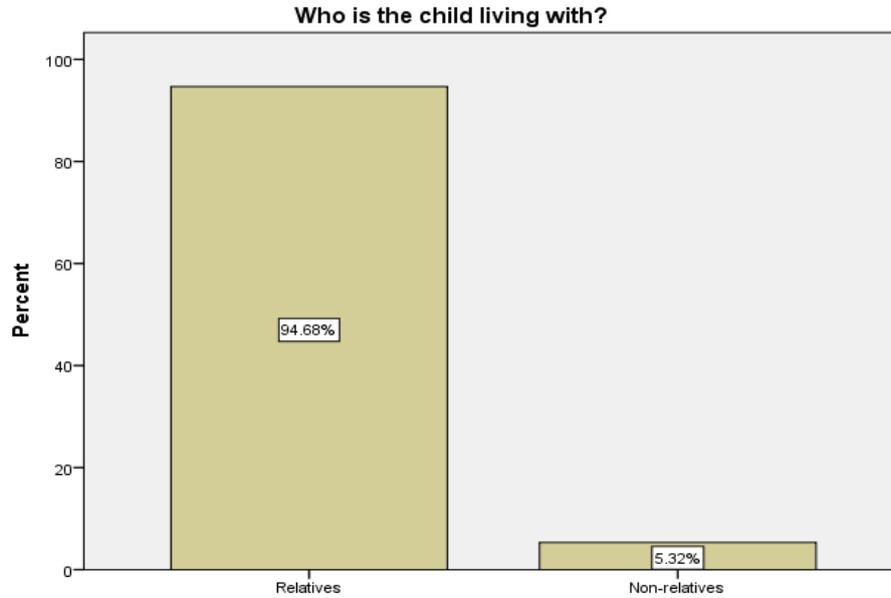


Figure 2.2: The vast majority of the children are staying with relatives such as grandparents. About 5% of the children are living with non-relatives including family friends and neighbours – while this group is a minority it bears further attention as the willingness of caregivers without any family ties to undertake their responsibilities over a period of time may be an issue.

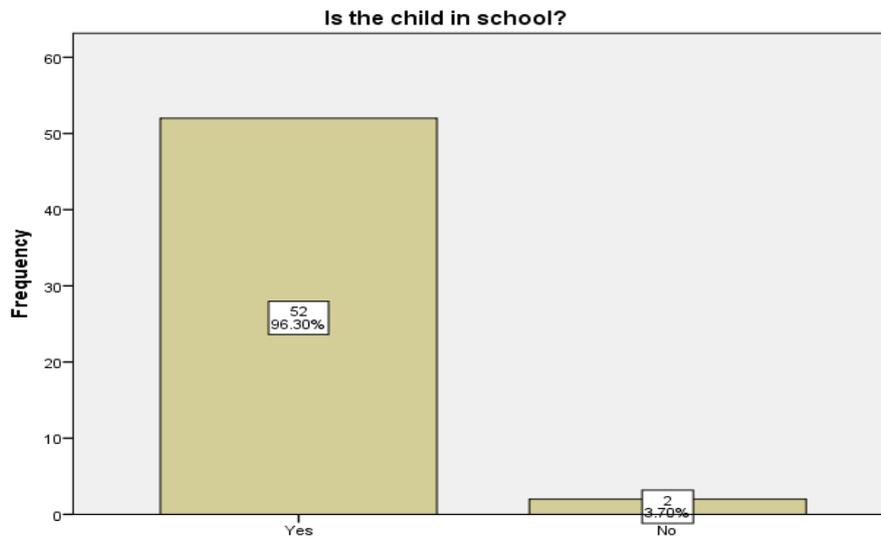


Figure 2.3: Only 2 children of (primary) school-going age were not in school. However, this in itself does not denote regular school attendance for the ones in school.

5.2 Profile of the Caregivers

This section will highlight the demographic profile of the caregivers in this study.

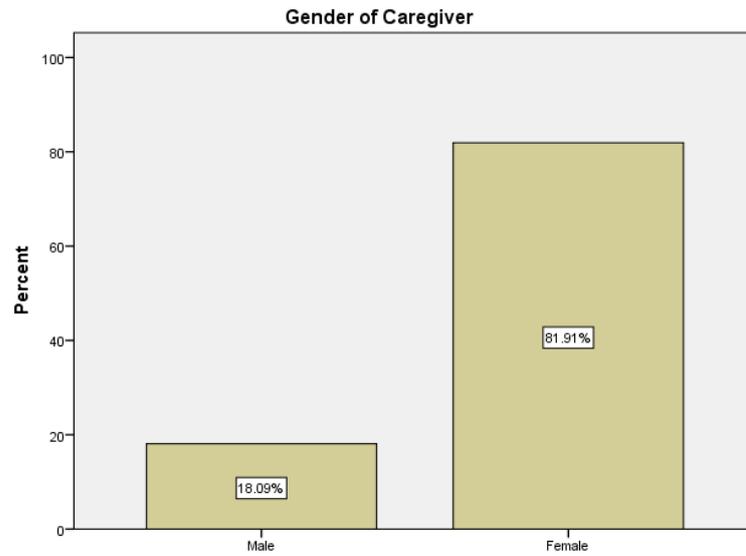


Figure 2.4: Four out of five primary caregivers are female.

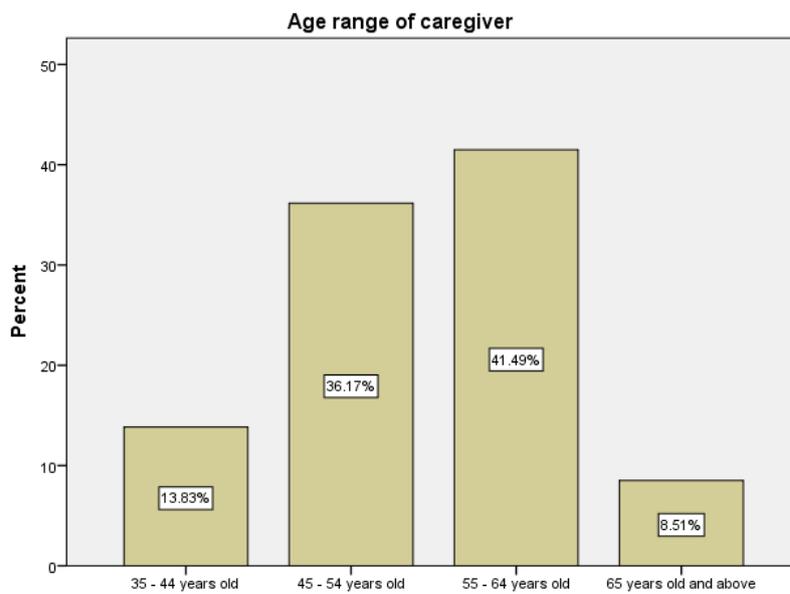


Figure 2.5: About 78% of the caregivers are between the ages of 45 and 64 years old. About one in twelve is a senior citizen. There are no primary caregivers who could be classified as youth with none being below 35 years of age.

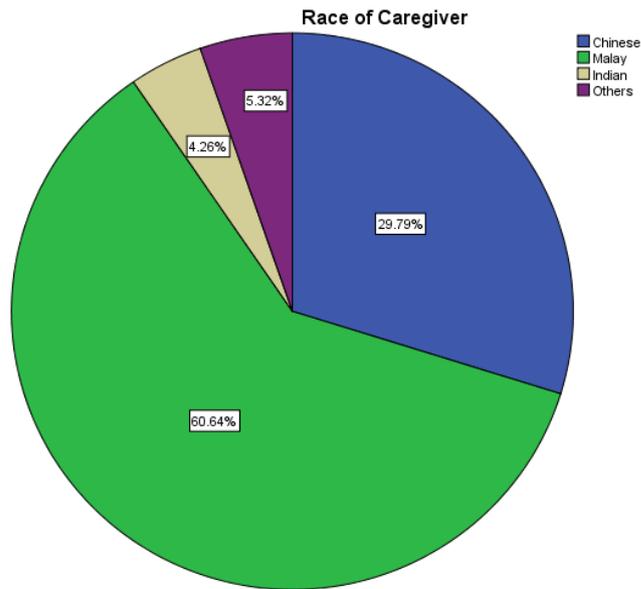


Figure 2.6

The majority of clients that sign up for the IIMAC programme are Malay. It is extremely rare for the caregiver to be of a different race to the child.

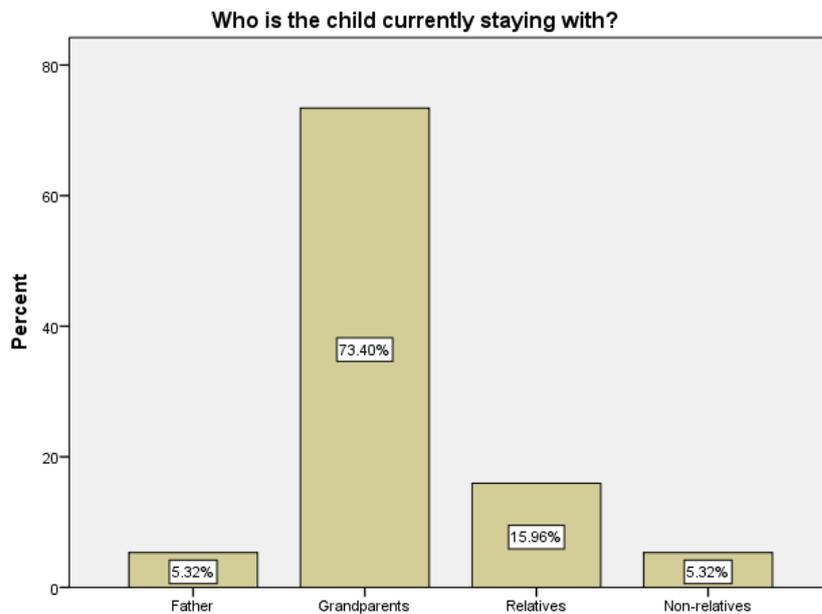


Figure 2.7

Almost three-quarters of the children are cared for by their grandparents. If other relatives are included 95% of these children are in the care of relatives.

Even though almost half of the mothers in this sample are married, it is important to note that most of the fathers are absent from the children's lives when the mothers are in prison. From the case studies, it is evident that these fathers are not present in the children's everyday lives. When a mother is incarcerated, a child needs a father to look up to as a parental role model. Remaining in the care of the child's other biological parent may serve an important function as a stable attachment figure to the child (Dallaire, 2007). In a study conducted by Poehlmann et. al. (2008), more caregiving stability is reported when the children live with their fathers as compared to

placement with other relatives such as grandparents. This is because parents may exhibit a more intrinsic investment in their own children as compared to that shown by other relatives.

When the father is also absent in the child's life, the child will feel isolated, unloved and neglected (ibid.). The effects of interrupted parent-child relationships can manifest both at the individual level within families and at the school level among students who are influenced not only by disruptions of their own families but also by the spill-over influence from disruptions and absences in the families of others (ibid.). Furthermore, in a study conducted by Fritsch and Burkhead (1981) which examined the impact of parental absence in the children's lives, it was found that the absence of fathers will result in the children displaying hostile behaviours and disciplinary problems in school. Meanwhile, a mother's absence would cause the children to display withdrawal symptoms in their lives. This would include daydreaming, unwillingness to engage in play, fear of school, crying a lot and having a lot of nightmares.

5.3 Hypotheses

According to literature, caregivers who are suddenly entrusted with the caregiving duties, find themselves struggling financially with the added responsibility, which places even more stress on the caregiver. This suggests that there might be a possibility that these caregivers may be less capable physically and emotionally in providing care for these children. Caregivers who experienced drastic life changes can also become isolated from social support due to added responsibility and be at higher risk of experiencing stress and depression. Thus, this paper will examine five hypotheses in relation to the children and the caregivers;

Hypothesis 1: Children of incarcerated mothers have a higher likelihood of performing poorly in school.

Hypothesis 2: Children who were cared for primarily by their mother pre-incarceration were more likely than not to experience disruptions to their current living arrangements upon her incarceration.

Hypothesis 3a: The primary caregivers are more likely to struggle financially and require financial assistance to care for the children.

Hypothesis 3b: The primary caregivers who struggle financially tend to receive financial assistance to care for the children.

Hypothesis 4a: The primary caregivers are more likely to be emotionally strained as a result of their caregiving.

Hypothesis 4b: Caregivers who require emotional support do not seek any form of assistance.

Hypothesis 5: Caregivers who are afflicted with long-term medical issues tend to struggle to discharge their caregiving duties.

Hypothesis 1:

Children of incarcerated mothers have a higher likelihood of performing poorly in school.

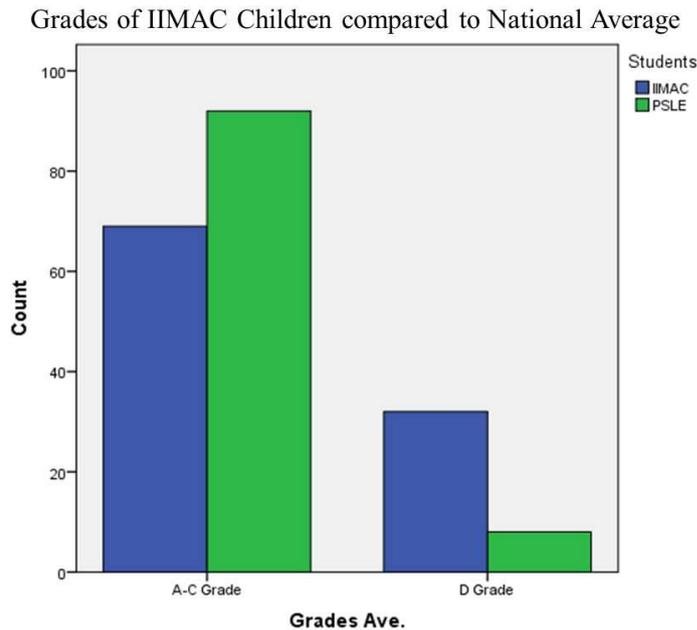


Figure 3.1

This chart examines the academic results of children in this study who are in primary school. Figure 3.1 highlights that 68.5% of children between 7 to 12 years old received at least a C grade average in their school examinations, and 31.5% a D average. The comparison will be paralleled against the 2015 cohort who had sat the PSLE as this is the only available and comparable data that is accessible to the public. For the PSLE in 2015, 92.3% of the students received at least a C grade average for all four of the standard subjects (Ministry of Education, 2016).

The figures above mean that the IIMAC-student cohort is 4 times more likely to achieve a D average grade for examinations compared to the national average. This is consistent with existing literature on the subject as previous studies have shown that a parent’s incarceration may have a negative impact on their children’s grades as they would experience trauma, anger and anxiety as a result of being separated from their mothers who are usually the main caregivers (Reed and Reed, 1997). The sudden absence of their mothers and missing their mothers is correlated to their poor academic performance in school. According to Hairston (2007), school performance is extremely important for children to succeed, but quite often when parents become incarcerated school achievement decreases. Throughout a mother’s incarceration, high priority should be given to the child’s academic performance, attendance in school and emotional well-being.

While providing additional academic support in the form of individual or group tuition can address the technical aspects of why the child is falling behind in school it cannot be done in isolation if one expects to see a commensurate improvement in the grades of these students. Special attention needs to be given to the child’s psychological and emotional well-being as well. Children of incarcerated mothers may require counselling and a role model whom they could look up to in order to reduce the negative emotions that they may be experiencing towards their mother. Some of the interventions that can be implemented for the children would include crisis intervention counselling, community-based therapeutic service and support group involvement. Therapeutic interventions help traumatized children master the effects of current and previous traumas and overcome future trauma by improving individual coping skills (Reed and Reed, 1997).

5.4 Stability of Care Arrangement

Hypothesis 2:

Children who were cared for primarily by their mother pre-incarceration were more likely than not to experience disruptions to their current living arrangements upon her incarceration.

One of the key effects of a mother's incarceration on the children is the disruption in the children's living arrangements (Seymour, 1998). The need for consideration of children's welfare and caregiving needs occur at multiple points including at arrest, sentencing and imprisonment. When the mother enters the prison, the children will have to be placed under the care of immediate relatives or friends. From the findings, slightly more than half of the children were cared for by their mothers prior to incarceration. The subsequent incarceration of the mother made it more likely for the children to be placed under the care of a grandparent or other relatives, thus forcing them to move houses and maybe even schools. This may situate the child in a (slightly) unfamiliar environment, requiring them to not only adjust to a new home and school, but also to a new caregiver and the possibility of a different parenting-style.

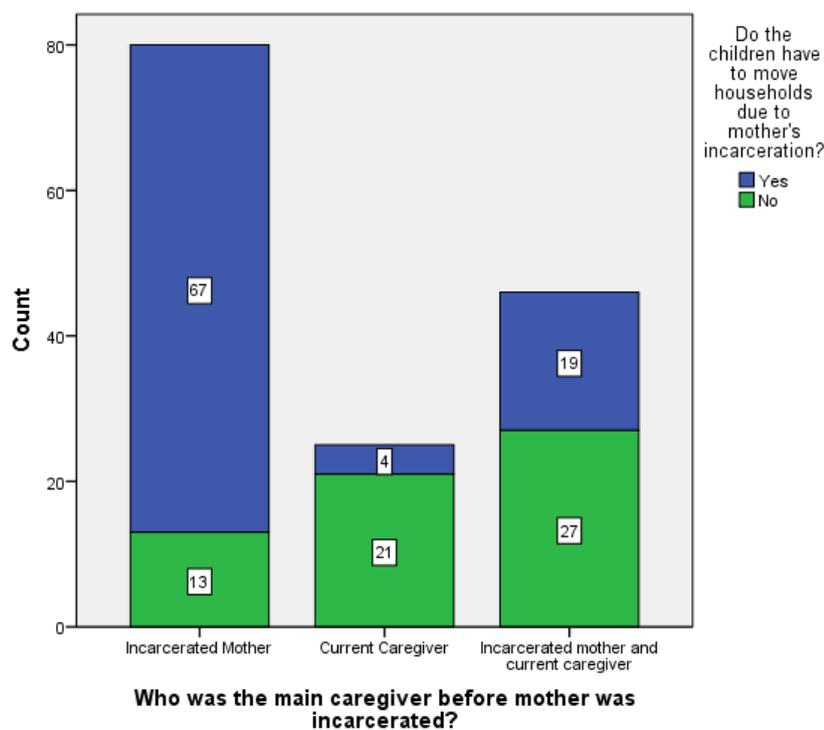


Figure 4.1

In figure 4.1, 80 out of 151 children (53%) were cared for primarily by their mothers before their incarceration, while 47% of the children had some familiarity with the current caregiver performing a similar role prior to the mother's incarceration. A total of 90 children (59.6%) had to shift to a new household as a result of maternal incarceration; children whose mother was their primary caregiver accounted for 67 of them – three-quarters of the children whose living arrangements were disrupted. This indicates that children who had their mothers as the main caregiver have a higher likelihood to be displaced as compared to children were not cared by their mothers before their incarceration.

Based on the study, more than half of the children (53%) would have to adapt to a temporary caregiver whom they may not be familiar with. For children who are not living with their mothers at the time of the arrest, the mother's latest incarceration may provide little change in their daily lives because they go on living in the same house, and in the care of the current caregivers (Seymour, 1998). Even though mothers may not have had full-time parenting responsibility, they often report regular and frequent contact with their children, and so these children are not unaffected by the incarceration.

The degree of disruption in these children's living arrangements depends on where they go and who takes care of them during the mother's incarceration. Having to live with a new caregiver who is not their parent, necessitates the children adapt to a new living arrangement, which requires some time for the children to adjust and accept the changes in their lives. This caregiving arrangement is usually a short-term arrangement while the mother is in prison, this means that children have to adjust to a new location, school, and parenting style each time they move. This instability can be detrimental to their emotional health. Attachment theory explains that psychological problems stem from the interruption of a relationship between a child and a primary caregiver (Stalker & Hazelton, 2008). When a mother is in and out of prison or a child is being moved from home to home, attachment fails to form between the child and their primary caregiver. The lack of relationship can mean a lack of stability, emotional support, and nurturing for the child. This loss of an emotional attachment to a caregiver, especially when repeated several times, leads the child to eventually develop defence mechanisms that make it almost impossible for that child to form attachments to anyone later in life (ibid.). They begin to have a distorted view of themselves and significant relationships in their lives. The effect of a mother being absent from their children's lives can have significant negative consequences on the children.

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	42.795 ^a	2	.000
Likelihood Ratio	47.532	2	.000
Linear-by-Linear Association	18.172	1	.000
N of Valid Cases	94		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 7.45.

Figure 4.1.1:

A chi-square value of 0.000 (***) indicates that the results are statistically significant at the 0.1% level. Thus, the second hypothesis can be accepted.

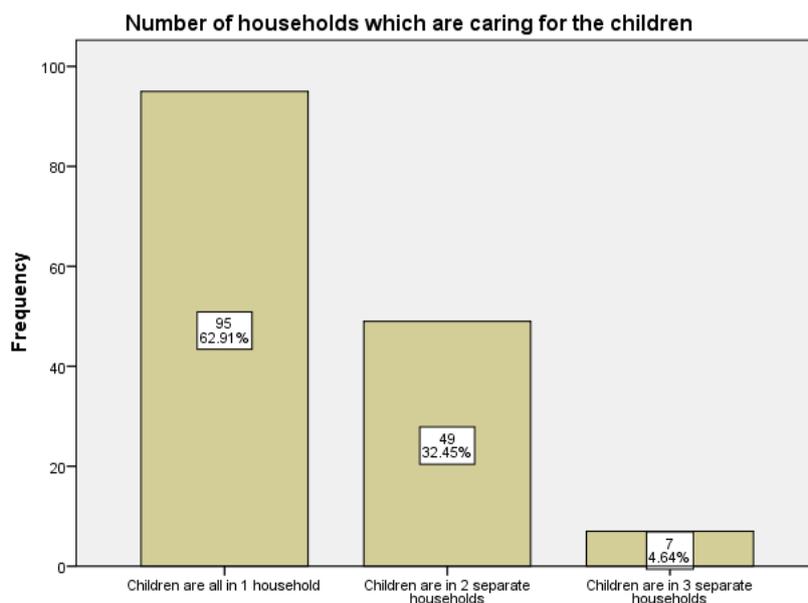


Figure 4.2

In figure 4.2 above, 62.9% of the children stayed together in one household while 37.1% were separated from their sibling(s) and had to live in two or more different households.

The study also found that, on top of the separation from their mother and likelihood of disruptions to living arrangements, almost one in four children had the additional traumatizing experience of being separated from their sibling(s) during their mom’s incarceration. The children may also be passed from caregiver to caregiver, and moved to new schools several times in the course of the incarceration period.

It is important to note that 56 children in this study were separated from their siblings and had to live in different households. The primary caregivers had to separate the siblings as most of the caregivers are not able to financially support all the siblings. As can well be expected several studies indicate that separation from siblings may be traumatizing for young children in the context of maternal incarceration (Poehlmann et. al., 2008). Siblings can function as subsidiary attachment figures for young children during a mother’s temporary absence especially if they are placed in the same household. According to Bowlby (1973), fathers and siblings are the most frequent attachment figures apart from the mothers. The presence of the child’s own brothers or sisters in a new household helps to ease the child’s adjustment to the new home (ibid.). When siblings are separated and cared for by different caregivers, the children will feel a sense of loss and may add to the negative feelings that they are already experiencing. If separation is really unavoidable, it is important to ensure that the siblings have frequent contact with each other.

Hypothesis 3a:

The primary caregivers are more likely to struggle financially and require financial assistance to care for the children.

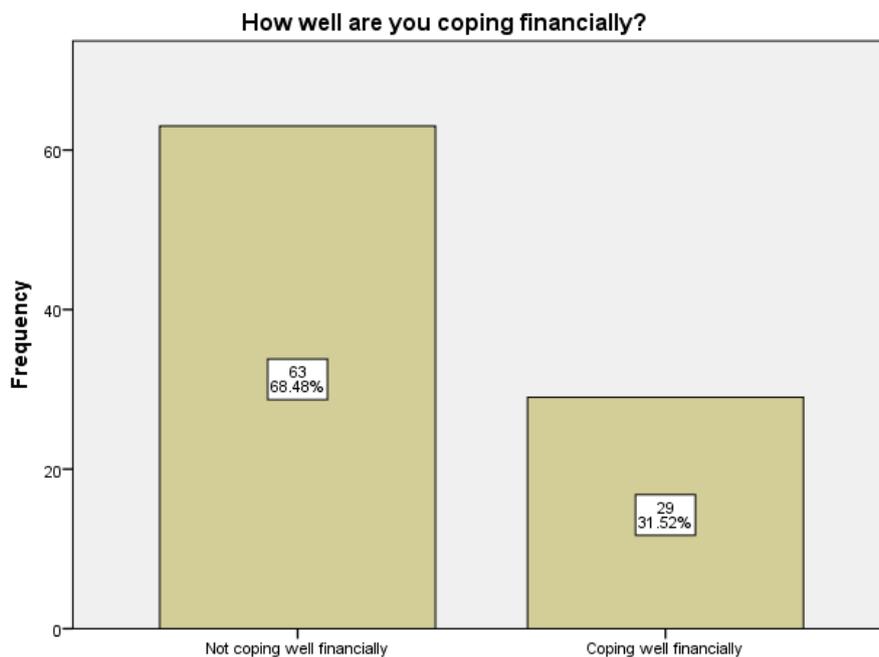


Figure 5.1

Over two-thirds of the caregivers indicated that they were unable to cope with the added financial burdens experienced as a result of the caregiving responsibilities undertaken. Figures based on 92 respondents.

In figure 5.1 above, 68.48% of the caregivers indicated that they require financial assistance from various government agencies or from friends and relatives in order to manage their caregiving responsibilities. Caring for the children is considered a familial responsibility for the primary caregivers especially when they are related to the incarcerated mothers. Even though the primary

caregivers may be experiencing financial difficulties, they would still take care of the children due to kinship ties as the family would make their own private arrangements in response to the mother’s incarceration. Understandably these caregivers do not receive any form of financial support from the mothers who are in prison.

Low personal and household incomes along with limited financial resources can result in increased caregiver risk for negative outcomes, particularly if there are substantial out-of-pocket costs for care recipient needs (Mumola, 2000). Caregivers who are not working or who have low household income may experience more distress because they may have fewer resources to meet care demands. Overall, financial concerns cause particular distress for caregivers during long treatment periods, as resources become depleted (ibid.). Higher-income families, with greater financial resources to purchase needed care, might not become as distressed or burdened as those with limited resources.

Hypothesis 3b:

Most of the primary caregivers who are struggling financially receive the required financial assistance.

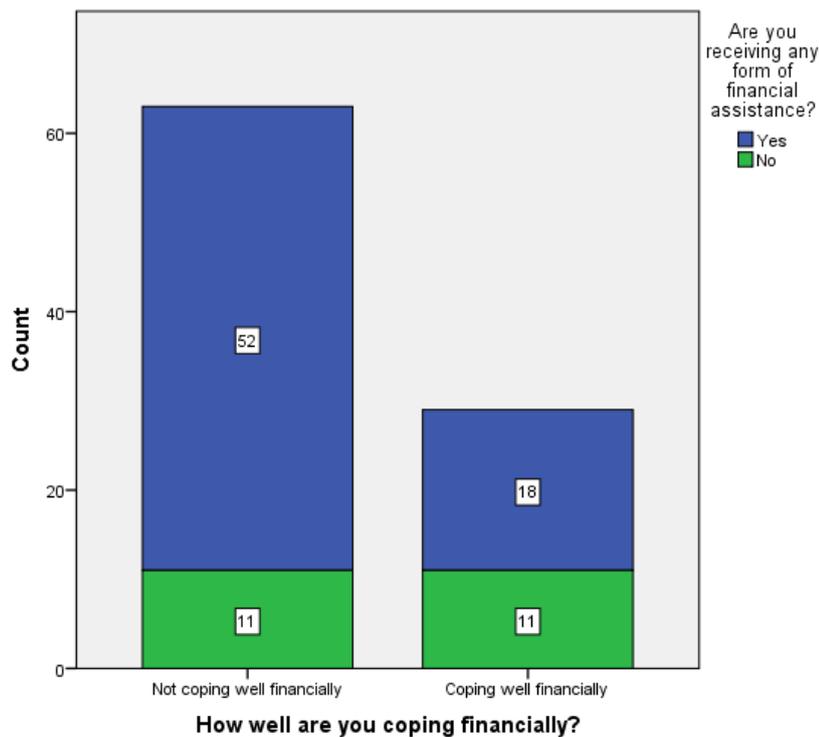


Figure 5.2

82.5% of the caregivers who indicated that they aren’t coping well were recipients of financial assistance. 74.3% of all recipients of financial assistance (52+18 = 70 recipients in total) indicated they still weren’t able to cope. Figures based on 92 respondents.

Overall 68.5% of the caregivers interviewed indicate that they are unable to cope, financially, with the added responsibility of caring for the children during their mother’s incarceration.

It is evident from figure 5.2 that a vast majority of the caregivers who are financially constrained (82.5%) are receiving some form of financial assistance. That said, the 17.5% that are not coping well and yet aren’t receiving assistance is not statistically insignificant and bears further investigation. On

the face of it then this does indicate that most caregivers in need are aware of sources of financial aid that they can turn to and are actually receiving some form of financial help.

Yet the issue of whether this hypothesis holds true or not likely depends on whether one places emphasis on the mere receipt of assistance or interpreting “required financial assistance” as help which enables the recipient to meet their financial requirements and thus report that they are able to cope. If the latter interpretation is considered, it is sobering to note that almost three out of every four caregivers receiving financial aid (74.3%) indicated that they were still unable to cope even with the said assistance. This in itself does not necessarily mean that the assessment conducted and assistance provided are ineffective as there may be many other factors that need to be considered before drawing a reasonable conclusion. However, such a high proportion of recipients reporting their inability to cope even after receiving help certainly warrants further investigation.

Hypothesis 4a:

The primary caregivers are more likely to be emotionally strained as a result of their caregiving.

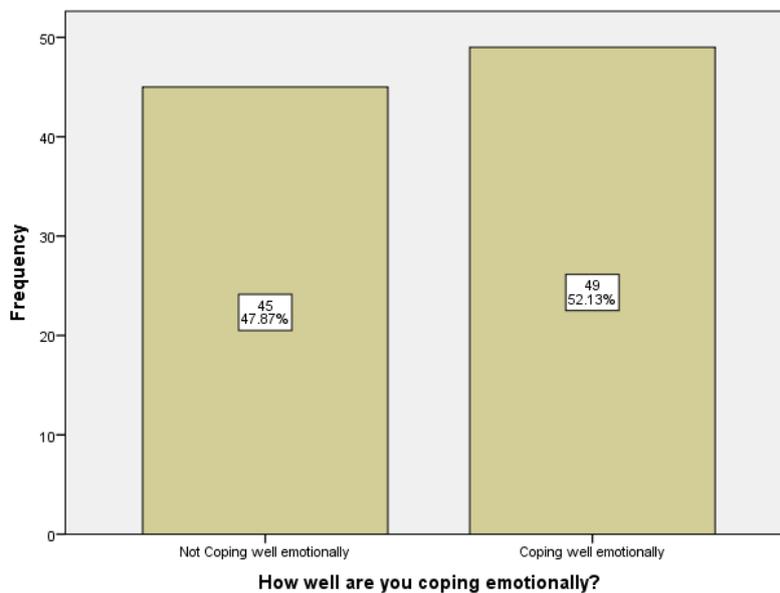


Figure 6.1

Slightly more than half (52.13%) of the respondents indicated that they were able to cope with the emotional demands brought about by their caregiving responsibilities.

In the study 47.87% of the caregivers indicate that they are unable to cope well emotionally with additional responsibilities that have been entrusted to them. It is interesting to note that while a clear majority (68.5%) indicated that they couldn't manage financially this did not translate into similarly heightened levels of emotional distress. One possible explanation (though this was not investigated) is Maslow's hierarchy of needs theory which posits that people then to prioritise and be more able to identify material needs (physiological and safety tiers) as compared to emotional ones. On the face of it then this hypothesis does not seem to hold true, but only just.

Caregivers are emotionally strained with the additional caregiving duties as there are many emotions that they may need to address with the arrest of their loved ones. The caregivers may have a feeling of resentment, embarrassment, guilt, and disappointment regarding their kin's incarceration and this may magnify the caregiver's psychosocial distress (Deanne, 2000). Caregiver resentment is usually towards the incarcerated mother as the caregiver would experience the

feelings of unfairness of being thrust into the role of caring for the young children (ibid.). The feelings of anger, resentment, disappointment and tiredness may spill to other areas of their lives and affect their emotional well-being. While these caregivers are (only just) in the minority they none-the-less are a significant group and there is a need to examine what forms of emotional support from friends, family or professionals can be rendered to them.

Caregivers who attempt to balance caregiving with their other activities, such as work, family, and leisure, may find it difficult to focus on the positive aspects of caregiving and often experience more negative reactions, such as an increased sense of burden (ibid.). Regardless of the amount of care provided, caregivers may become increasingly more distressed if they are unable to participate in valued activities and interests. Caregiving responsibilities can have a negative effect on work roles as caregivers adapt employment obligations to manage and meet care demands. Caregivers who are employed report missed days, interruptions at work, leaves of absence, and reduced productivity because of their caregiving obligations (Mumola, 2000). They have difficulty maintaining work roles while assisting family members. On the other hand, employment provides some caregivers respite from ongoing caregiving activities and serves as a buffer to distress.

Hypothesis 4b:

Caregivers who need emotional support do not seek any form of assistance.

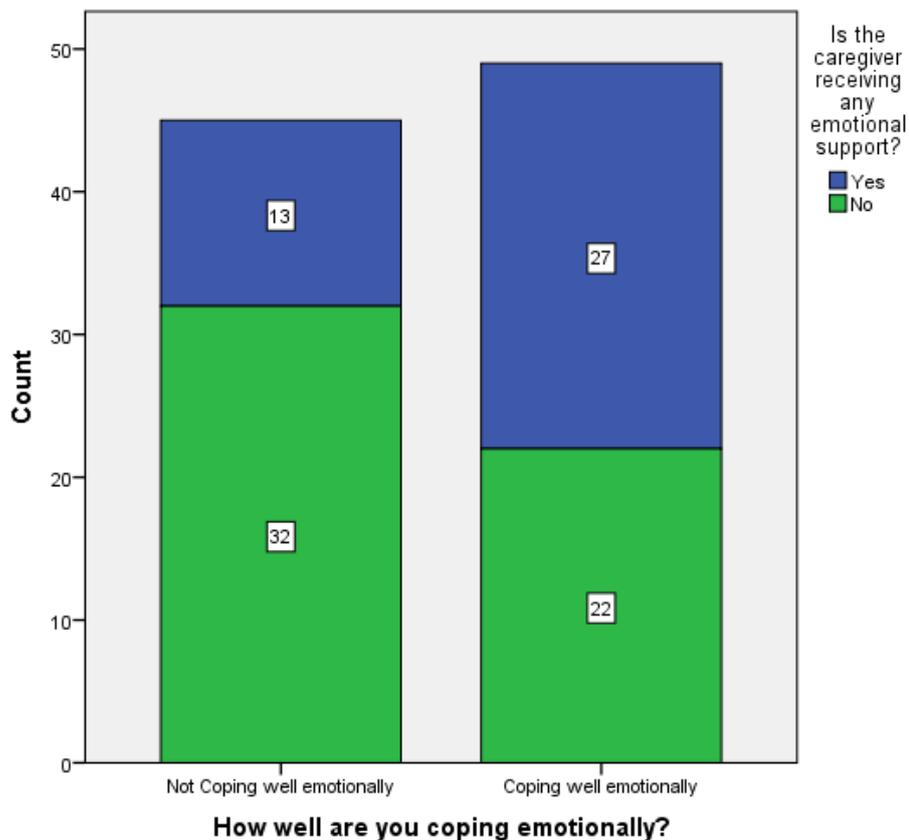


Figure 6.2

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	13.769 ^a	4	.008
Likelihood Ratio	15.723	4	.003
Linear-by-Linear Association	.964	1	.326
N of Valid Cases	94		

a. 2 cells (20.0%) have expected count less than 5. The minimum expected count is 1.91.

Figure 6.2.1

The cross tabulation analysis above highlights a total of 45 out of 94 caregivers are not coping well emotionally, with 71% of the caregivers not seeking any form of assistance when facing difficulties. Less than a third of the caregivers who are emotionally distressed (29%), confided in someone about their concerns and issues in caring for the children. A chi-square value of 0.008 (**) suggests that the correlation is statistically significant at the 1% level. There is a correlation between the 2 variables and the fourth hypothesis can be accepted.

One possible reason for caregivers not to confide in anyone is fear of the social stigma of having an incarcerated family member. Many family members do not tell even their closest friends about their relative's incarceration and go to great lengths to protect the children from the consequences of revealing this family secret. The social stigma that is attached to having an incarcerated family member usually hinders the caregiver from sharing their emotional problems with a friend or professional counsellor (Dallaire, 2007). Depending on the crime and the prevalence of imprisonment in the neighbourhood in which they live, family members may be the object of social stigma or hostility in that neighbourhood. There is, nevertheless, a social stigma which families experience from other elements of society. The spouse, parent or child of a prisoner may not experience stigma directly until they reveal the incarcerated relatives status to a child's teacher or a neighbour (ibid.).

Cultural values would also influence a person's willingness to share their emotional issues. In the Asian context, individuals may be reluctant to seek help as such behaviour is regarded as a source of shame or "loss of face" (Cheong & Snowden, 1990). It is important to reassure caregivers that it is safe to share their difficulties and problems with a professional if they are not keen to confide in their family members or friends. Additionally, seeking emotional help from another person can be an intense and emotionally draining experience; previous studies have shown that many individuals who seek emotional help withhold their emotions as they are afraid to express their feelings to another person (Kelly, 1998).

In the current social service landscape, financial resources are more readily available to caregivers of children of incarcerated mothers as compared to emotional support. Agencies unintentionally tend to neglect the caregivers' emotional well-being as there are fewer services available for caregivers to emotionally cope with their caregiving burden. It is important to render emotional support for the caregivers as the tremendous stress of caregiving may result in a caregiver's burnout in the future. Agencies can provide support groups for caregivers of children with incarcerated mothers and share their problems and issues with one another. Apart from that, caregivers can be paired up to a befriender who can provide a listening ear to them and also assist them in caring for the children whenever they require a short break from their caregiving duties.

Hypothesis 5:

Primary caregivers who are afflicted with long-term medical issues tend to struggle to discharge their caregiving duties.

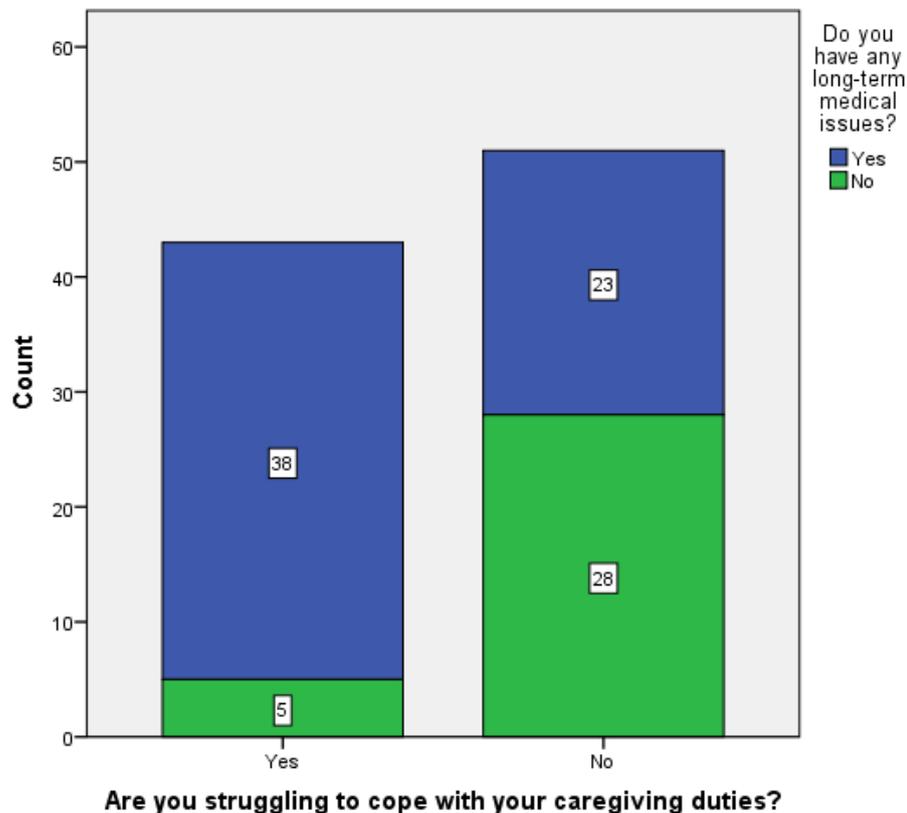


Figure 7.1

Overall 64.9% of the caregivers suffer from long-term medical ailments. Of these, 62.3% indicate that it has negatively impacted on their ability to properly discharge their caregiving responsibilities.

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	19.366 ^a	4	.001
Likelihood Ratio	21.166	4	.000
Linear-by-Linear Association	14.282	1	.000
N of Valid Cases	94		

a. 3 cells (30.0%) have expected count less than 5. The minimum expected count is 2.46.

Figure 7.1.1: A chi-square value of 0.001(***) is statistically significant at 0.1% level.

A cross tabulation analysis highlights that 88% of the caregivers who are struggling to care for the children have personal long-term medical issues to contend with. These caregivers indicate that their medical ailments include hypertension, diabetes, back and knee problems, asthma, high cholesterol levels and various heart conditions. A small percentage of the caregivers (12%) report no issues with caregiving even though they have long-term medical ailments. As the chi-square value is

0.001 (***) , this shows that the correlation between the two variables is statistically significant at the 0.1% level.

Caring for young children requires more energy and attention on the part of the caregivers (Deanne, 2000). Hence, if the caregivers have long-term medical issues, it will affect the level of care that the caregivers are able to provide for the children. The health of the caregivers plays a crucial role in determining whether the caregiver is able to care for the children. One of the challenging aspects for these caregivers in raising young children is having the energy to keep up with the grandchild physically. Additionally, caregivers with long-term health issues may not have regular follow-ups at a clinic or hospital as they may worry about the expenses of their treatment (ibid.). It is important for caregivers who have long-term health issues to receive additional financial assistance for their medical expenses. Agencies which are in contact with caregivers and children of incarcerated mothers need to take into account the caregivers' physical health in ensuring that the caregiver is able to perform their duties.

6. DISCUSSION & RECOMMENDATIONS

The findings in this study have highlighted and confirmed four of the five hypotheses and part of the fifth. The following are some of the issues that the study has highlighted as well as some suggested follow-up that may be considered.

6.1 Effects of short to medium-term living arrangements on the children

When caregivers are entrusted with the responsibility to care for the children, one should take into account whether the home environment is conducive to raising young children. Due to the sudden nature of the mothers' arrest and subsequent urgent need for caregivers to take care of these children it is reasonable to assume that many caregivers may not be prepared for the responsibilities thrust upon them. While four-fifths of the caregivers are female and usually have been in a mothering role with their own children, they typically may not be prepared to deal with or even be aware of the unique needs of the incarcerated mother's children.

One such consideration might be the trauma a child experiences upon the arrest of his/her mother, which often leads to overt emotional and psychological adjustment reactions in the child. A child's academic performance in school is an indication of how affected he/she is by the mother's incarceration. Based on the findings the school-going children in the study appear to be fairing worse than their peers in examinations. While part of the problem may be academic there can be little doubt that the troubling circumstances these children find themselves in obviously compounds the academic struggles they experience.

One of the many challenges faced by these children is the struggle to come to terms with their conflicting feelings about their mother's sudden disappearance; they may, on the one hand, be angered by their mother's absence but paradoxically feel somehow responsible for it on the other. Furthermore, differences in the parenting styles between the caregivers and the incarcerated mother may make it difficult for the children to adapt to the new arrangements. Several critical factors that affect children when a parent is incarcerated include the reduction or total loss of contact with the parent. This will affect the parent's functional role and threatens the development of parent-child attachments. The stress created by the unexpected and often sudden departure of the parent will be accompanied by a sharp reduction in income and possible housing problems. The

lack of straightforward information with regards to the mother's whereabouts often causes the family to keep the truth from the children. This reduces that parent's ability to provide adequate support and attention to children who are already feeling neglected.

6.2 Support for caregivers

Children may feel abandoned and express anger toward the caregiver, and in turn, caregivers may be angry with the incarcerated parent and/or resent or punish a child who rejects help. Caregivers may lack the skills to provide children with nurturing and stimulating environments and be overwhelmed by the responsibility of caring for a child who may be struggling at home and in school. It is evident from the findings that grandparents are the most common kin caregivers; their poor health due to long-term medical conditions and social isolation make it challenging to care for young children. Many families experience significant social stigma as a result of one member's criminality. The findings highlights that the families require practical, social and emotional assistance to ensure a smooth transition to the new caregiving arrangements. Information and material support are effective tools to engage families and can alleviate immediate hardship.

It is notable that with additional children to care for, 56.5% of the caregivers are not financially prepared to care for the children and 47.9% are not emotionally ready to accept their additional responsibilities. These caregivers received financial assistance from the various government agencies to ease their financial burden. However, there is not much support and programmes in place for caregivers to ease into the caregiving arrangements.

Furthermore, most of the caregivers may not have the experience and knowledge to equip them to be aware of any emotional or psychological issues that the children may be facing as a result of the mother's incarceration. Thus, it is important to have caregiving and parenting programmes for caregivers to equip them with the knowledge and skills to handle young children confidently. These programmes will equip the caregivers with the knowledge to promote a child's holistic development, including the importance of interaction play and having quality time with the children. The programme also needs to address the trauma that children of incarcerated parents face and how caregivers can assist in their adjustment.

It is important to provide caregivers with respite care as it will give them a short break from their caregiving duties and has been shown to reduce stress associated with parenting a grandchild (Burton, 1992). For caregivers who are taking care of children between the age of 0 to 6 years old, it is rather difficult to perform typical household chores such as cooking or ironing without any help as the children require an adult supervision most of the time. It would be valuable for caregivers whether working or non-working, to be given additional assistance such as access to childminding services which may be run by volunteers to care for the children for a short period of time while the caregivers do their household chores, run an errand or take time to rest from their caregiving roles. It is essential for all caregivers to schedule time for themselves on a regular basis so that they are able to maintain their emotional and physical health. A short respite from their caregiving role is important to ensure that the caregivers would not suffer burnout. Also, it may be beneficial for the caregivers to have access to a support group comprising caregivers in similar circumstances. This would encourage caregivers to share their problems with others well placed to empathise. This support group can be facilitated by professionals or trained volunteers who would then assist them to address their emotional needs and recommend resources that could be of help.

Even for a short prison stay, changes in caregiving arrangements can cause notable family-level disruption. Incarcerated parents and caregivers alike note parenting and family interactions as a

source of stress. Assuming responsibility for a kin's children can disrupt the caregiver's work arrangements, plans for retirement and the lives of other people in the household (Harrison, 1997). The findings indicate that the readiness of the caregivers to care for the child depends on the strength of social support network that she has, as well as her emotional and financial preparedness and general state of health.

7. CONCLUSION

Changes in caregiving arrangements will cause notable family-level disruption both for the children and the primary caregivers. It is important to ease the transition for both the children and the caregivers to adapt to the new caregiving arrangements.

Children of incarcerated mothers are emotionally and physically affected by their mother's incarceration. These children tend to perform poorly in their studies and additional priority should be given to improve the child's academic performance in order for them to not be handicapped by the unfortunate family circumstances they already find themselves in. While the majority of them are cared for by their grandparent(s) the study did highlight the troubling fact that 37.1% of these children have been separated from their siblings due to caregiving arrangements – the double whammy of being abruptly separated from their mothers and then consequently from their siblings is likely to cause no end of distress to these young ones. The worry then is that services provided to the children are more likely to focus on academic achievement and material needs leaving the emotional trauma of the mother's incarceration largely untreated.

Caregivers need to receive the appropriate financial assistance and emotional support in order to care for the children well. Introducing services early to families such as providing parenting education, programs that encourage family bonding, providing emotional support to families and ensuring childcare arrangements to affected children allow family members to better cope with the disruptive changes that they experience. Maintaining family and community ties during and after incarceration, as promoted in parenting programs, may decrease the probability of recidivism for the mothers. Providing relevant services based on the needs of the families will be useful especially for families with dependent children as it would prepare the affected families and inmates to cope with the re-entry of the parent into the family setting with fewer disruptions. This would allow caregivers, incarcerated mothers, and their children to achieve better long-term outcomes when they are given opportunities to develop healthy family and parenting relationships. The relevant stakeholders which include the prisons, family service centres, and community organisations need to work together to ensure that these services can be delivered to the families in a timely and coordinated manner.

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